

Current Planning Division Variance Request Form

Applicant:	
Address:	
Phone:	Fax:
Owner:	
Company:	
Address:	
Phone:	Fax:
Subdivision/Project Name:	
Type of Variance:	
Section of ordinance from which variance is being sought:	
Variance justification:	
This is to certify that the information on this form is COMPLETE make this application.	E, TRUE and CORRECT and the undersigned is authorized to
Signature of Applicant	Date
Submittal Requirements ☐ Completed Application ☐ Submittal Fee \$400 (non-refundable) ☐ Three (3) copies of the site plan or plat, including vicini ☐ Names and mailing addresses of all property owners a (if applicable)	